

gromey Docket No. <u>ALLNP0105US</u>

COMBINED DECLARATION AND POWER OF ATTORNEY (ORIGINAL, DESIGN, NATIONAL STAGE OF PCT)					
As a below named inven	tor, I hereby declare that:				
addings first and cala inv	e address and citizenship are as entor (if only one name is listed to fithe subject matter which is claim	helow) or an original, first	and loint inventor	(II Diniai	
Title: MAGNETIC ME	MORY DEVICE				
the specification of which	1				
applicable) and	. tober 13, 2005 as 4961US , as Serial No. not yet I and claimed in PCT Interna and amended under PCT A	tional Application No.	PCT/SG200		
including the claims, as	e reviewed and understand the co amended by any amendment refo to disclose information which is , Code of Federal Regulations §	erred to above. s material to the patenta			
patent or inventor's cert than the United States of patent or inventor's certi the United States of An application(s) of which p (d) no such applicat		ed States Code, §119 of a lapplication(s) designation a also identified below a collication(s) designating at	g at least one cou ny foreign applica least one country	tion(s) for other than	
FARLIES	is nave been filed as follows. ST FOREIGN APPLICATION(S), MONTHS FOR DESIGN) PRIOF	IF ANY FILED WITHIN TO THIS U.S. APPLICA	12 MONTHS ATION		
COUNTRY	APPLICATION NUMBER	DATE OF FILING (day, month, year)	PRIORITY CI UNDER 35 U		
WIPO RO/SG		10.4. 11.0000	X Yes		
WIPO RO/SG	PCT/SG2003/000088	16 April 2003	<del></del> -	No	
WIPO RO/SG	PCT/SG2003/000088	16 April 2003	Yes -	No	

ALL FOREIGN APPLICATION(S), IF ANY FILED MORE THAN 12 MONTHS (8 MONTHS FOR DESIGN) PRIOR TO THIS U.S. APPLICATION

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## **POWER OF ATTORNEY**

As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) associated with the Customer Number listed below to prosecute this application and transact all business in the Patent and Trademark Office connected therewith.

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L.	2000
Direct Correspondence To:	Direct Telephone Calls To:
The address associated with the above- mentioned customer number.	Name: Thomas W. Adams Tel. No: 216/621-1113 Fax No. 216/621-6165
The undersigned to this declaration and power to accept and follow instruction from	of attorney hereby authorizes the U.S. attorney(s) named herein
Name(s) of authorized representation(s) Alle Address One Marina Boulevard #28-00, Singa	n & Gledhill apore 018989
communication between the U.S. attornev(s) a	and Trademark Office regarding this application without direct and the undersigned. In the event of a change in the person(s) attorney(s) will be so notified by the undersigned.
information and belief are believed to be true; a	in of my own knowledge are true and that all statements made on and further that these statements were made with knowledge that able by fine or imprisonment, or both, under Section 1001 of Title Iful false statements may jeopardize the validity of the application
Full name of sole or first inventor Yuank	kai Zheng
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DateCountry of Citiz	zenship
Residence	
Post Office Address	
CHECK FOR ANY OF TH FORM A PA	IE FOLLOWING ADDED PAGE(S) WHICH IRT OF THIS DECLARATION
Signature for fourth and subsequent j Added page to combined declaration a In-part (CIP) application.  X This declaration ends with this page.	oint inventors. Number of pages added and power of attorney for divisional, continuation, or continuation-
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